## 12030752924

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED 7

2012 MAR -8 AM II: 22

			-	· <u></u>			F'FORICAMA KINIYCENTER
NAME OF COMMITTEE (in	full)		(Check if name is changed)		mple:If typing, type the lines.	12FE4N	15
GARGIA,	FOR	<u>.</u> C	9NGRE	<u> </u>			
ADDRESS (number ar	nd street)	499 S. ZANF SUITE 600					
(Check if address is changed)		DAGGA					
		DA	4CIAS			ZX	75,20,8-
				CITY		STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)							
(Check if		اعاما	rici vaid t	TH Q	acolina or	<u> </u>	
is change			11111	<u> </u>			
COMMITTEE'S WEB	PAGE AD	DRESS (	URL)				
(Check if address is changed)							PN 5 RESS
2. DATE 03 64 2012							
3. FEC IDENTIFIC	CATION N	JMBER	C				
4. IS THIS STATE	MENT U	NE	v (N) OR	ķ	AMENDED (A)		
I certify that I have e	examined th	nis Staten	nent and to the b	est of my	knowledge and belief it	t is true, corr	ect and complete.
Type or Print Name	of Treasure	, <u>り</u>	wati	Pat	el		
Signature of Treasure	er U	wit	Pat	el		Date 0	3 06 2012
NOTE: Submission of			-	•	oject the person signing		t to the penalties of 2 U.S.C. §437g.
Office Use Only					For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)